

options

2015 enrollment highlights guide

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enroll online:

mylacountybenefits.com

enroll by phone:

888-822-0487

questions?

Benefits Hotline representatives are available
Monday through Friday,
8 a.m. to 4 p.m. 213-388-9982

Extended hours during annual benefits enrollment
Monday through Friday, 8 a.m. to 5 p.m.

your benefits

The County of Los Angeles cares about you and your family. That's why we offer a comprehensive benefits program that includes medical, dental, life, and medical coverage protection (long-term disability health insurance) to help you enrich your life while protecting your future and your loved ones.

ATTENTION! IF YOU WANT TO WAIVE OR DECLINE COVERAGE, YOU MUST TAKE ACTION!

Waiving Medical Coverage

To waive medical coverage, you must choose to waive and provide information on your coverage each year. There are no exceptions.

You may waive medical coverage and receive the \$228 *Options* waiver allowance if you are covered through your spouse or domestic partner's plan, another employer's group plan, or Medicare, and your other plan offers coverage similar to *Options*.

If you do not submit a new or updated waiver for 2015, or if your waiver is not approved, you will be automatically enrolled in the Kaiser Permanente HMO and won't be able to waive again until 2016.

Declining Medical Coverage

You may decline coverage for 2015 if you buy an individual policy or insurance through the state, federal, or private health insurance marketplaces.

If you decline coverage, you WILL NOT receive the \$228 *Options* waiver allowance.

OPTIONS 2015 BENEFITS AT A GLANCE

Medical

- Kaiser Permanente HMO
- UnitedHealthcare HMO
- UnitedHealthcare Select Plus PPO

Dental

- MetLife (SafeGuard) HMO-style plan
- DeltaCare HMO-style plan
- Delta Dental PPO-style plan

Life Insurance

- Basic life insurance
- Optional life insurance
- Dependent life insurance

Accidental Death and Dismemberment (AD&D) Insurance

Medical Coverage Protection (Long-Term Disability Health Insurance)

Spending Accounts

- Health Care Spending Account
- Dependent Care Spending Account

Choose Carefully – Your Elections Are Final

After the enrollment deadline, you won't be able to make any changes until next year's annual benefits enrollment. The only exception is if you have a qualifying life event, such as a change in family or work situation, which may make you eligible to change your elections. Some examples include birth or adoption of a child, marriage, or divorce. You must complete a life event enrollment and submit supporting documents to the Plan Administrator within 90 days of the qualifying life event. Refer to pages 13-16 of the *Options* Summary Plan Description (SPD) for details.

Find More Details in Your Summary Plan Description

Your enrollment materials often refer to the *Options* Summary Plan Description (SPD). The SPD is a valuable resource containing detailed plan information. You may download a copy of the *Options* SPD at mylacountybenefits.com.

dependent eligibility

Your dependents may be eligible for *Options* medical and dental plans.* Eligible dependents include:

- Your spouse or domestic partner
- Your children, which includes children born to you, children legally adopted by you, children awaiting finalization of their adoption by you, stepchildren, children of whom you are the legal guardian, children you support because of a valid court order, and children of your domestic partner:
 - Under age 26
 - Age 26 and older if your child became disabled before their 26th birthday (must be approved by your medical plan)

When adding eligible family members during annual benefits enrollment, you must provide Social Security numbers (SSN) and required documents (birth/adoption/marriage certificate) within 10 calendar days from enrollment.

* The dependent group term life, accidental death and dismemberment plans, and Spending Accounts have different dependent eligibility requirements. See your *Options* SPD for details.

medical plans

	Health Maintenance Organization (HMO) Plans	Preferred Provider Organization (PPO) Plans
Coverage	Provides comprehensive medical coverage, including (but not limited to): <ul style="list-style-type: none"> • Preventive care • Major medical care • Routine medical care • Behavioral health care 	
Seeking Care	<ul style="list-style-type: none"> • You choose a primary care physician (PCP) who oversees your care and refers you to HMO specialists • You have a network of HMO providers to choose from • Except for emergency care, you must be treated by an HMO network physician or hospital to receive benefits 	<ul style="list-style-type: none"> • You can see any licensed doctor or specialist • Your out-of-pocket expenses will be lower when you use providers from the PPO network of participating doctors, hospitals and other health care providers
Determining Costs for Services	<ul style="list-style-type: none"> • Generally, there are no deductibles • You pay a specified amount for many services • An HMO generally costs less in annual deductibles and copays than a PPO plan 	<ul style="list-style-type: none"> • Generally there is a deductible before the plan pays benefits • Deductible is waived for preventive care when you use network providers • Out-of-pocket expenses are lower when you use PPO network providers



To Find a Network Provider:

Kaiser Permanente HMO

- Go to www.kp.org/countyofla
- Select "Find a Doctor" section

UnitedHealthcare HMO

- Go to www.healthyatcola.com
- Select "Doctor Search" located in the left-side navigation bar

UnitedHealthcare Select Plus PPO

- Go to www.healthyatcola.com
- Select "Doctor Search" located in the left navigation bar

dental plans

Your *Options* program offers two HMO-style dental plans:

- MetLife (SafeGuard)
- DeltaCare

You also have a PPO-style dental plan:

- Delta Dental

When you enroll in the **HMO-style dental plans**, you choose a dental office, which becomes your “primary care office,” and you must go to this office for all of your dental care.

The **PPO-style dental plan** offers two different networks of participating dentists and dental care providers:

- Delta Preferred Provider Option (PPO) network: Using this network offers the highest benefits. Most preventive services are covered at 100%; many other services are covered at 85%. You pay no deductible.
- Delta Participating Dentist network: Delta pays benefits based on a fee agreement with the network’s dentists. Most routine services are covered at 85%.

To Find a Network Dentist:

MetLife (SafeGuard)

- Go to www.safeguard.net
- Select “Find a Dentist” and follow the instructions

DeltaCare and Delta Dental

- Go to www.deltadentalins.com
- Select “Find a Dentist” and follow the instructions

When you enroll in a PPO-style dental plan, you can go to any dentist in either network, or to an out-of-network dentist.

When you use network providers, the plan pays higher benefits (you pay less).

For more details, review the Medical and Dental Plans Comparison Chart you received with this guide or the *Options* SPD, which is online at mylacountybenefits.com.



prescription drug benefits



Your medical coverage includes prescription drug coverage. For more details about these benefits, review the Medical and Dental Plans Comparison Chart you received with this guide or contact your medical plan.

In addition, if you are taking “maintenance medication” — for high blood pressure, cholesterol, thyroid conditions, or birth control, for example — using your plan’s mail-order service will generally save you money. Plus, you get the convenience of having your medications delivered to you rather than having to pick them up at the pharmacy.

Save Money with Generic Drugs

You will save money when you substitute brand-name drugs with generic drugs, which become available when the original patent on the brand-name drug expires. When you are prescribed a brand-name drug, ask your health care provider if a generic version is available.

Medicare Part D Notice

If you or your dependents have Medicare or become eligible in the next 12 months, a federal law gives you more prescription drug coverage options. See the Medicare notice in the legal notices in your benefits enrollment packet.

additional protection

Sometimes, the unexpected happens and it affects not just your own life, but also the lives of those you care about. Your *Options* program offers life insurance, AD&D insurance, and LTD health insurance to protect you and your family.

Life Insurance

The County gives you basic life insurance at no cost to you.

- General Members of Retirement Plan A, B, C, D, or G of the Los Angeles County Employees Retirement Association (LACERA): You are insured for \$2,000.
- Members of Retirement Plan E: You are insured for \$10,000.

You may buy optional life insurance of one to eight times your annual salary. You may only increase your insurance amount by one times your annual salary each year.

If you buy optional life insurance for yourself, you may also buy a limited amount of life insurance for your spouse or domestic partner and dependent children. The Personalized Enrollment Worksheet in your enrollment packet

shows how much you can buy and your monthly cost of coverage. See the *Options* Summary Plan Description (SPD), at mylacountybenefits.com, for more information.

Accidental Death and Dismemberment Insurance (AD&D)

You can buy AD&D insurance at low monthly rates. If you die in an accident, become paralyzed, or lose a limb, eyesight, speech, or hearing because of an accident, your AD&D insurance pays benefits. Review your Personalized Enrollment Worksheet for AD&D coverage amounts and monthly costs.

If you have AD&D coverage under *Options*, you may also buy coverage for your eligible spouse or domestic partner and dependent children. See the *Options* SPD, at mylacountybenefits.com, for important rules.

Medical Coverage Protection Long-Term Disability (LTD) Health Insurance

If you are a General Member of Retirement Plan A, B, C, D, E, or G of LACERA and are enrolled in a UnitedHealthcare or Kaiser medical plan, you are eligible to participate in the

LTD health insurance plan. It will help you continue your medical insurance coverage if you are eligible for long-term disability benefits and become totally and permanently disabled.

If you are participating in the *Options* program and become disabled after January 1, 2008, you will be covered by LTD health insurance at no cost to you, provided you meet the eligibility requirements. LTD health insurance pays 75% of your monthly medical premium and you pay the remaining 25%. Beginning January 1, 2008, if you're eligible for LTD health insurance, you can elect to buy additional coverage at a cost of \$3.00 per month. The additional coverage pays 100% of your medical plan premium while you receive LTD benefits.

Keep in mind, if you do not elect (or you cancel) the optional 100% LTD health insurance coverage for a plan year, you cannot elect this coverage for the next plan year. You must wait two calendar years before you again have the option to elect this coverage. See the *Options* SPD, at mylacountybenefits.com, for more information.



spending accounts

Spending Accounts offer a great way to save money on eligible health care and dependent care expenses. You never pay federal or state income taxes on the money you contribute. That means you could save between 10% and 30% on every dollar you spend on health care or dependent care, depending on your tax bracket. However, you should carefully estimate the amount of expenses that you will be able to pay from these accounts to determine how much you want to contribute. If there's money left in your Dependent Care Spending Account at year end, you won't get it back (IRS requirements). This is sometimes referred to as the "Use it or Lose it Rule." With a Health Care Spending Account, you can carry over up to \$500 in unused funds to spend in the following year. See the next page for details.

That's why it's important to take a little time to plan, and don't put more in your account than you estimate you will spend for the year. *Options* offers two types of Spending Accounts:

Tutorial and Calculators Available Online!

The online tutorial and calculators are easy ways to learn how to use Spending Accounts and plan your contribution amount. To access the online tutorials, log on to mylacountybenefits.com and select "Online Tutorials" from the "my tools" drop down menu at the top of the page.

ENROLL IN EITHER OR BOTH	
Health Care Spending Account	Dependent Care Spending Account
Pay for eligible health care expenses with pre-tax dollars, including but not limited to: <ul style="list-style-type: none"> • Medical plan copays • Deductibles • Prescription drugs • Eyeglasses, contacts, laser eye surgery • Out-of-pocket dental expenses • Hearing aids and tests • Chiropractic care • Nicotine patches and nicotine gum prescribed by a doctor • Plus many more expenses Some expenses (such as insurance premiums) are not eligible for reimbursement.	Pay for eligible dependent care expenses with pre-tax dollars while you and your spouse work outside the home or attend school full time. These expenses include, but are not limited to: <ul style="list-style-type: none"> • The cost of properly licensed day care centers, summer day camp • Nursery school • Preschool • Child and adult day care provided at your home Dependent Care expenses must be used for the care of a: <ul style="list-style-type: none"> • Child under the age of 13 • Mentally or physically disabled child of any age, or • Legally dependent adult who spends a minimum of eight hours each day in your home and is unable to care for himself/herself
When you enroll, you decide how much to contribute to each account	
You can contribute a maximum of \$200 a month	You can contribute a maximum of \$400 a month
Expenses for both types of Spending Accounts must be incurred by December 31, 2015, and submitted for reimbursement by June 30, 2016. See the Spending Account section of the <i>Options</i> SPD, at mylacountybenefits.com , for more information about eligibility and what other types of expenses you can pay with tax-free dollars through a Spending Account.	

Make Your Dependent Care Spending Account Even More Valuable

If you have eligible dependents and enroll in the Dependent Care Spending Account, the County will make a nontaxable monthly contribution based on your annual pay. You don't need to contribute, but you must enroll to be eligible for the County contribution. See the chart at the right to find out how much the County will contribute in 2015.

YOUR ANNUAL BASE PAY	COUNTY'S MONTHLY CONTRIBUTION (Subject to Annual Cap on Contribution)
Less than \$30,000	\$375
\$30,000 to \$34,999	\$300
\$35,000 to \$39,999	\$275
\$40,000 to \$44,999	\$200
\$45,000 to \$49,999	\$125
\$50,000 or more	\$75

Total contributions, yours and the County's, to a Dependent Care Spending Account cannot exceed \$4,800 a year if married and filing jointly, or \$2,500 if married and filing separately (IRS limits).

Important Note: SEIU Local 721 and the plan sponsor, the County of Los Angeles, agreed to an annual maximum dollar amount the County will spend for this benefit and how this benefit will be administered. This benefit will be monitored on a monthly basis. If the dollar maximum is reached in any month in 2015, the contribution you receive from the County will be reduced that month and will be suspended for the remainder of the plan year. In addition, you may be allowed to make other changes that are consistent with a qualifying change in status, cost, or coverage (for example, revoking your election if your dependent care provider quits or terminates its contract with you). See the *Options* SPD, at mylacountybenefits.com, for more information.



Health Care Spending Account: Carry Over up to \$500 Each Year

Recently, the IRS modified the “use it or lose it” rule governing the Health Care Spending Account (HCSA). This change lets you carry over up to \$500 in unused funds to spend in the next plan year. You will lose any remaining balance above \$500.

The amount you carry over to the next year will not affect your annual maximum contribution. You can still contribute up

to the full \$2,400 each year. Any money you carry over will be added to your contribution amount. Please note that the carryover rule does not apply to the Dependent Care Spending Account (DCSA). If you enroll in a DCSA, you must spend all your funds by the end of the plan year.

To learn more, check out the Spending Accounts “eMagazine” (see below for more information).

Health Care Reform and You

Last year, we introduced you to the new Health Insurance Marketplace.

As part of Health Care Reform, the marketplace was designed to provide affordable health insurance for qualified individuals and families, with the help of federal subsidies. Because you are eligible for *Options* medical coverage, you likely won’t qualify for the federal subsidies in the marketplace. That’s because your *Options* medical coverage meets or exceeds the affordability standards required by the Affordable Care Act.

If you choose to buy insurance through the marketplace, you may decline *Options* medical coverage; however, if you decline that coverage, you will not receive the \$228 *Options* waiver allowance.

New Spending Account eMagazine

The County of Los Angeles is excited to introduce the Spending Account eMagazine — a new online magazine. It’s stocked with many interactive features to help you get the most out of the Health Care and Dependent Care Spending Accounts. Here are a few examples:



Interactive — clickable

The eMagazine features pop-up buttons and rollovers to help you access more in-depth information. Be sure to look for these links within each page.



Voice-over audio

The voice-over feature guides you through the eMagazine, giving you a brief overview of the contents on each page. Just click on the audio button at the bottom of each page to activate the voice-over.



Downloadable PDF forms

No more searching for claim forms. Everything you need is available in the eMagazine. You can download the PDFs and print them at your convenience.



Savings calculator

You can link to an online calculator that estimates your tax savings when you use a Spending Account. Plus, there are built-in worksheets to help you add up your yearly expenses.



Visit mylacountybenefits.com and click on the eMagazine link on the homepage to discover this new tool.



CONTACT INFORMATION

Contact	Phone Number	Fax Number	Website
BENEFITS SYSTEM			
Benefits Enrollment	888-822-0487	310-788-8775	www.mylacountybenefits.com
COUNTY DEPARTMENT OF HUMAN RESOURCES			
Benefits Hotline	213-388-9982	N/A	http://dhr.lacounty.info/
MEDICAL			
UnitedHealthcare HMO	800-367-2660	N/A	www.healthatcola.com
UnitedHealthcare Select Plus PPO	800-367-2660	N/A	www.healthatcola.com
Kaiser Permanente HMO	800-464-4000	N/A	www.kp.org/countyofla
DENTAL			
MetLife (SafeGuard)	800-880-1800	N/A	www.safeguard.net
DeltaCare	800-422-4234	N/A	www.deltadentalins.com
Delta Dental	888-335-8227	N/A	www.deltadentalins.com
SPENDING ACCOUNTS			
Benefit Concepts, Inc.	866-629-6436	866-629-6390	www.mylacountybenefits.com
LIFE AND AD&D INSURANCE			
CIGNA Life	800-842-6635	N/A	www.mycigna.com

Your *Options* benefits program is a joint effort of the County of Los Angeles and SEIU Local 721. They work together to negotiate the benefits that are offered, the amount of the monthly benefit allowance, and other details of the program.

This Highlights Guide is not an official *Options* Summary Plan Description (SPD) or official plan document. If you need a copy of an official plan document, contact the plan's customer service department directly. If there is a difference between what you read in this guide and what you read in an official plan document, the official plan document will rule.



This guide is printed on recycled paper to support the County's commitment to the environment.